| STATE OF WISCONSIN, CIRCUIT COURT,   |            | COUNTY  | For Official Use      |  |
|--|------------|---|-----------------------|--|
| IN THE MATTER OF THE GUARDIANSHIP OF   |            | Notice of Appointment of Successor Guardian (without hearing)  Person  Estate |                       |  |
| Date of Birth  |            | Case No   |                       |  |
| To: The ward named above and all interested persons  |            |   |                       |  |
| You are notified that a petition to the court requesting appointment of a successor guardian has been granted and: |            |   |                       |  |
| 1. On (date), the court appointed as successor guardian of   |            |   |                       |  |
| person:post-office address:  |            | phone number:   |                       |  |
| post-office addre  | SS:        | phone number:   | phone number:         |  |
| post-office address:   |            |   |                       |  |
| 2. You have the right to counsel.  |            |   |                       |  |
| 3. You have the right to petition for reconsideration of the successor guardian.                                   |            |   |                       |  |
|  |            |   |                       |  |
| This notice is being provided personally or by mail within 10 days after the appointment.                          |            |   |                       |  |
|  |            |   |                       |  |
|  |            |   |                       |  |
| Signature of Successor Guardian  |            |   |                       |  |
| dignature of educessor education   |            |   |                       |  |
|  |            | Name Printed or Ty  | Name Printed or Typed |  |
|  |            |   |                       |  |
|  |            | Address   | Address               |  |
| Name of Attorney   |            | 1   |                       |  |
| ·  |            |   |                       |  |
| Address  |            |   |                       |  |
|  |            | Date  |                       |  |
| Telephone Number   | Bar Number |   |                       |  |